

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Ronald L. Moy

Mailing Address 9663 Santa Monica Blvd

City

Beverly Hills

State

CA

Zip Code

90210-4303

FEC ID number of contributing
federal political committee.

C

Name of Employer

Moy-Fincher-Chipps

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 13 / 2015

Transaction ID : 5E08750D17EBBAC28AD

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Suzanne Olbricht

Mailing Address 41 Mall Rd

Department of Dermatology

City

Burlington

State

MA

Zip Code

01805-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lahey Clinic

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3515.00

Date of Receipt

MM / DD / YYYY
02 / 22 / 2015

Transaction ID : B4CA952E-8D8D-4494-

Amount of Each Receipt this Period

3515.00

Full Name (Last, First, Middle Initial)

C. Elise Olsen

Mailing Address 109 Carolina Forest Road

City

Chapel Hill

State

NC

Zip Code

27516

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dept of Dermatology

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1280.00

Date of Receipt

MM / DD / YYYY
02 / 03 / 2015

Transaction ID : 9D1E7E70545EDAE7834

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4765.00